

EXHIBIT 21

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Clotilde Hernández Delfi
Participant's Address: Apdo 180, Patillas, P.R. 00723
Participant's Email Address: hernandez cloty @ gmail . com
Name of Counsel: _____
Address of Counsel: _____
Email Address of Counsel: _____

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 121939
Nature of Claim: _____

By: Clotilde Hernández Delfi
Signature
Clotilde Hernández Delfi
Print Name

Title (if Participant is not an individual)

Date

RECEIVED

SEP 23 2021

PRIME CLERK LLC

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.